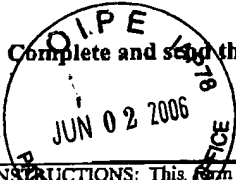


JUN. 2. 2006 12:02PM

TTC-PA 650-326-2422

NO. 5739 P. 3

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
 or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless noted below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

20350 7590 04/12/2006

TOWNSEND AND TOWNSEND AND CREW, LLP
 TWO EMBARCADERO CENTER
 EIGHTH FLOOR
 SAN FRANCISCO, CA 94111-3834

Certificate of Mailing or Transmission
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Valecie Peterson	(Depositor's name)
<i>Valecie Peterson</i>	(Signature)
June 2, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

10/637,215 08/08/2003 Adam Weiss 014116-79.00US 3326

TITLE OF INVENTION: HIGH PRECISION GAS BEARING SPLIT-AXIS STAGE FOR TRANSPORT AND CONSTRAINT OF LARGE FLAT FLEXIBLE MEDIA DURING PROCESSING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional YES \$700 \$300 \$1000 07/12/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

ROGERS, DAVID A

2856

073-865800

01 FC:2501 700.00 DA

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent from page 1001

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

02 FC:1504 300.00 DA
 03 FC:0801 10.00 DA
 Townsend and Townsend
 and Crew LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Photon Dynamics, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Jose, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 6

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 80-1430 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

David Slone

Date June 1, 2006

Typed or printed name

David N. Slone

Registration No. 28,572

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Attorney Docket No. 014116-007900US

FAX NO.: 1-571-273-2885

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
MAIL STOP - - ISSUE FEE

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of ADAM WEISS et al., Application No. 10/637,215, filed August 8, 2003 for HIGH PRECISION GAS BEARING SPLIT-AXIS STAGE FOR TRANSPORT AND CONSTRAINT OF LARGE FLAT FLEXIBLE MEDIA DURING PROCESSING are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Letter (1 page)
2. PART B - FEE(S) TRANSMITTAL, and 1 copy (2 pages)

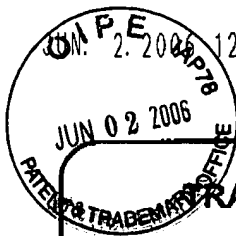
Number of pages being transmitted, including this page: 4

Dated: June 2, 2006


Valerie Peterson

**PLEASE CONFIRM RECEIPT OF THIS PAPER BY
RETURN FAX TO (415) 576-0300**

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 650-326-2400
60786949 v1



JUN 2 2006 12:02PM

TTC-PA 650-326-2422

NO. 5739 P. 2

PTO/SB/21 (09-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing) Total Number of Pages in This Submission	Application Number	10/637,215
	Filing Date	August 8, 2003
	First Named Inventor	Weiss, Adam
	Art Unit	2856
	Examiner Name	David A. Rogers
	Attorney Docket Number	014116-007900US

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. PART B - FEE(S) TRANSMITTAL, and 1 copy, and 2. Fax Cover Sheet (with Certificate of Faxing)		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td></tr></table> <p>The attached is in response to the Notice of Allowance and Fees Due, mailing date 4/12/06 for the above-referenced application.</p>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature	<i>David N. Slone</i>		
Printed name	David N. Slone		
Date	June 1, 2006	Reg. No.	28,572

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax Number 1-571-273-2885 on June 2, 2006.			
Signature	<i>Valerie Peterson</i>		
Typed or printed name	Valerie Peterson	Date	June 2, 2006

60786955 v1